OUR PLACE WITHIN THE PSYCHOSOCIAL ENVIRONMENT

A JOURNEY FROM THE BIOMEDICAL MODEL TO OPEN DIALOGUE



MSSc Hon Social Psychology, MA Clinical and Abnormal Psychology

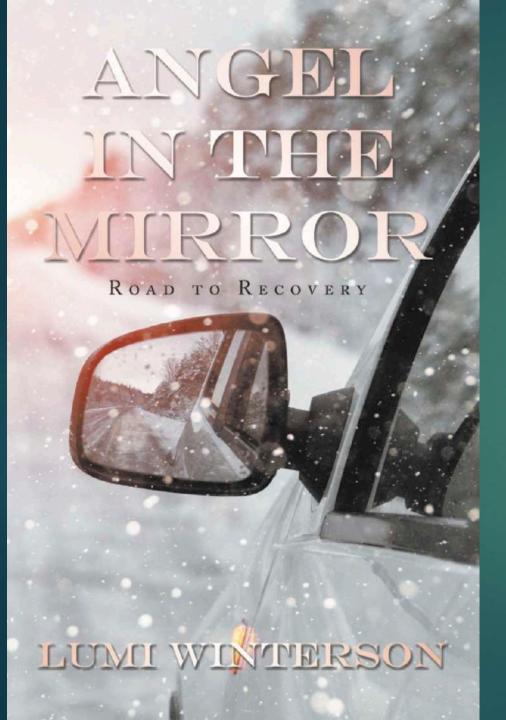
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Case Study Angel in the Mirror: Road to Recovery

- Recovery is possible
- Trust in your treatment team is vital
- Social support network needs to be involved in treatment
- Stress and anxieties can lead to psychosis and depression
- Learning positive coping skills makes life easier

www.lumiwinterson.com



Road to Recovery

- Trust in clinicians and inclusion of social support network as a part of the treatment team are helpful for recovery
- Anxieties, stress and fears may cumulate to the point that our brain can no longer deal with it rationally
- Symptoms may be expressions of our frustration and inability to deal rationally with challenges
- Unsolved difficulties can lead to depression, psychosis, development of mental illness, even suicide



MANAGING THE PRESURES OF LIVING

- Everything we experience and learn, habits and skills, good and bad happen through our cognitive processes in relation to and through our interaction with the environment.
- Noticing and acting promptly on early warning signs from early age onwards may stop mental illness from developing
- ▶ It can be difficult to see the early warning signs if people are blind to them or don't know what to do



KEYPOINTS IN INTERVENTION

TRUST – In all those around you

HONESTY – Feeling safe enough to disclose to friends/family about what is going on.

NOTICING THE LITTLE THINGS – Little problems can turn into huge ones if not dealt with early

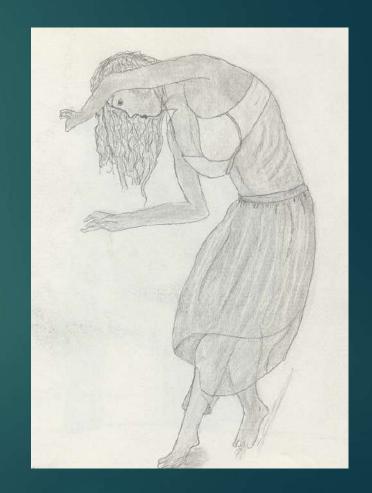
INTEGRATION OF SUPPORTS – Including all support group members in an open way in dealing with the problems at hand.

DEALING WITH WARNING SIGNS – From early childhood to old age, warning signs should be dealt with effectively and taken seriously.



Why Open Dialogue

- 1. Focuses on treating causes of mental illness in an attempt to stop mental illness developing
- 2. Each new case is treated as crisis within 24 hours
- 3. The social support network is engaged in the treatment team meetings.
- 4. Continuity of clinicians is vital for establishing trust.
- 5. Emphasis on psychosocial therapies to teach life skills Medication is used minimally ONLY when necessary





Use of Medication is Limited

- Medication does not cure the cause of mental illness, only stamp down / hide symptoms allowing the illness to become chronic
- Medication is always a trial and error.
- The change from one drug to another can be horrible and may mean long periods in hospital.
- ▶ The side effects can be devastating and radically shorten the life expectancy.





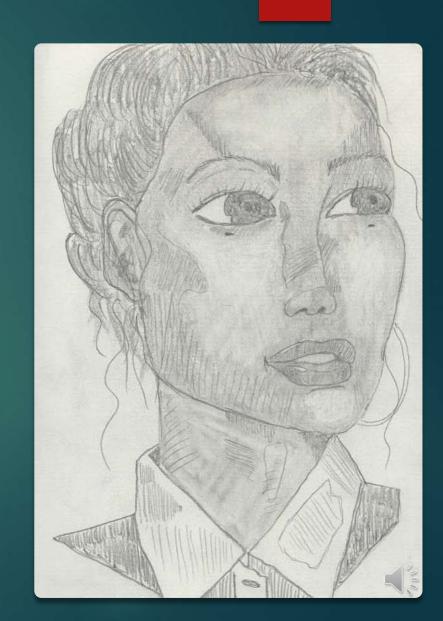
Management of Lumi's mental health

- Dialectical Behaviour Therapy (DBT) was introduced
- Open Dialogue principles were adapted to her treatment
- Social support network engaged as part of treatment team
- Transparency in communication and psychosocial therapies added to the Biomedical model being used



LUMI'S ROAD TO RECOVERY

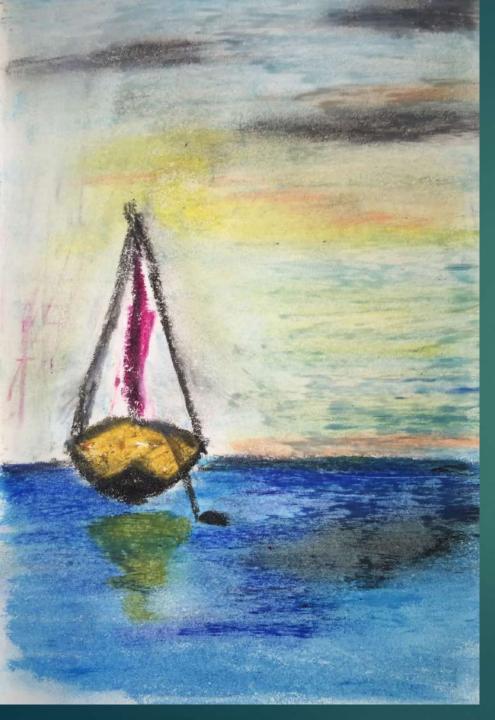
- > Essential elements of Lumi staying alive:
 - Love and hope
 - Belief that things will get better
 - Being accepted unconditionally
 - > Finding a hospital where she felt safe
 - Being able to develop trusting relationship with treatment team
 - Trusted clinicians working in partnership with each other and herself
 - Recognising the little things that matter



PREVENTION

- Physical causes of psychosis such as a tumour, high fever, lack of sleep, drink or food must be ruled out and rectified before the diagnosis of a mental illness is made.
- Therapies such as Dialectical Behaviour Therapy should be taught in schools to teach from a young age how to deal with emotions and consequential behaviours.
- Lumi's hope is that universities will accept her book as recommended reading for new health professionals so that they can understand the illness from a consumer's point of view.





COMMON WARNING SIGNS

- Social Isolation
- Becoming secretive
- Avoiding eye contact
- Irrational ideas as indicators of early psychosis
- > Self-harming
- > Extreme mood swings
- Lack of self care
- > Introversion
- Drug/alcohol abuse
- > Impulsivity
- Crying more than usual
- > Weight gain or loss
- Changes to eating patterns
- Obsessive behaviours e.g. washing hands



RESEARCH

'Made in America' - Robert Whitakar 2019

Biomedical model

International group of researchers in 2013 found that recovery rates for schizophrenia patients were 13% before year 1941, and rose to 17% between 1941 – 1975, then dropped to 10% in 1976 - 1995 and down to 6% from 1996 onwards.

Open Dialogue

Research by Jaakko Seikkula and Birgitta Alakare with Tornio group in their first 5 year research on recovery rates of Open Dialogue came up with superior outcomes. 80% of their first episode patients were asymptomatic, functioning well (working, in school, looking for employment), 20% were on government disability, 67% had never been exposed to antipsychotics, 13% had used them for a time and 20% took drugs regularly.

